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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	CALY-012
	First Named Inventor	Patrick A. Worfolk
	COMPLETE IF KNOWN	
	Application Number	10 / 056,178
	Filing Date	January 22, 2002
	Group Art Unit	2662
Examiner Name		

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MULTI-PATH DYNAMIC ROUTING ALGORITHM

the specification of which (Title of the Invention)

☐ is attached hereto
OR
☒ was filed on (MM/DD/YYYY) **01/22/2002** as United States Application Number or PCT International Application Number **10/056,178** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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[Page 1 of 2]

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
09/589,631	06/07/2000	

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Name	Registration Number	Name	Registration Number
Thomas Schneck	24,518	David M. Schneck	43,094
Mark Protsik	31,788	Nissa Strottman	P-52,257
Gina McCarthy	42,986		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number 003897 OR ☒ Correspondence address below

Name	Thomas Schneck				
Address	P.O. Box 2-E				
Address					
City	San Jose	State	CA	ZIP	95109-0005
Country	USA	Telephone	408/297-9733	Fax	408/297-9748

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname	
Patrick A.		Worfolk	
Inventor's Signature	<i>Patrick A. Worfolk</i>		Date
Residence: City	Campbell	State	CA
		Country	U.S.A.
Post Office Address	1526 Redding Park Lane		
Post Office Address			
City	Campbell	State	CA
		ZIP	95008
		Country	U.S.A.

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Serge				Plotkin			
Inventor's Signature					Date		
Residence: City		Belmont	State	CA	Country	U.S.A.	Citizenship
Post Office Address		2428 Coronet Blvd.					
Post Office Address							
City		Belmont	State	CA	ZIP	94002	Country
						U.S.A.	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Shmuel				Ravid-Rabinovitz			
Inventor's Signature					Date		
Residence: City		Jerusalem	State		Country	Israel	Citizenship
Post Office Address		36 Harav Berlin Street					
Post Office Address							
City		Jerusalem	State		ZIP	92506	Country
						Israel	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Itai				Aaronson			
Inventor's Signature					Date		
Residence: City		Belmont	State	CA	Country	U.S.A.	Citizenship
Post Office Address		2328 Wooster Avenue					
Post Office Address							
City		Belmont	State	CA	ZIP	94002	Country
						U.S.A.	

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Name	Registration Number	Name	Registration Number
Thomas Schneck	24,518	David M. Schneck	43,094
Mark Protsik	31,788	Nissa Strottman	P-52,257
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Address	P.O. Box 2-E				
Address					
City	San Jose	State	CA	ZIP	95109-0005
Country	USA	Telephone	408/297-9733	Fax	408/297-9748

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Given Name (first and middle (if any))		Family Name or Surname			
Patrick A.		Worfolk			
Inventor's Signature	<i>Patrick A. Worfolk</i>			Date	
Residence: City	Campbell	State	CA	Country	U.S.A.
				Citizenship	U.S.A.
Post Office Address	1526 Redding Park Lane				
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Given Name (first and middle (if any))		Family Name or Surname					
Shmuel		Ravid-Rabinovitz					
Inventor's Signature	Shmuel Ravid					Date	8/8/2002
Residence: City	Jerusalem	State		Country	Israel	Citizenship	Israeli
Post Office Address	36 Harav Berlin Street						
Post Office Address							
City	Jerusalem	State		ZIP	92506	Country	Israel
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))		Family Name or Surname					
Itai		Aaronson					
Inventor's Signature						Date	
Residence: City	Burlingame	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	1210 Bellevue Avenue, Apt. 204						
Post Office Address							
City	Burlingame	State	CA	ZIP	94010	Country	U.S.A.

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Given Name (first and middle (if any))				Family Name or Surname			
Shmuel				Ravid-Rabinovitz			
Inventor's Signature						Date	
Residence: City	San Francisco	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	111 Chestnut Street, Apt. 303						
Post Office Address							
City	San Francisco	State	CA	ZIP	94111	Country	U.S.A.
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Itai				Aaronson			
Inventor's Signature						Date	8/14/02
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